

## STATE OF NEW HAMPSHIRE

Statement of Receipts and Expenditures (RSA 664:6)

6-Month Report for CANDIDATES After 2004 General Election

| I EDWARD                                      | "NED" GORDON O   | f 69 PLEASAN                     | T STREEY                      |  |  |  |  |
|---|--|----------------------------------|-------------------------------|--|--|--|--|
| BRISTUL                                       |  | (street) idate for the office of |                               |  |  |  |  |
| (town/city zip cod                            | e)   | date for the office of           |                               |  |  |  |  |
| County of <u>GYAF</u>                         | hor District No. 1   | for the                          | for the party,                |  |  |  |  |
| And I, DOROTA                                 | 44 M. GORDON   | fiscal agent, do su              | ibmit the following report of |  |  |  |  |
| receipts and expenditur                       | es.  |                                  |                               |  |  |  |  |
| ·   | SUMMARY OF RECE  | IPTS AND EXPEND                  | ITURES                        |  |  |  |  |
| 6-1   | MONTH REPORT AFT   | ER 2004 GENERAL                  | ELECTION                      |  |  |  |  |
| Date of Report:                               | May 2, 2005 □  | November 2, 2005                 |                               |  |  |  |  |
| Surplus or deficit bro<br>From General Electi |  | 1)                               | s 45,589.49                   |  |  |  |  |
|   | since last report if a <b>deficit</b><br>from General Election | 2)                               | \$ 346.55                     |  |  |  |  |
|   | ures since last report if a t forward from General Election    | 3)                               | \$                            |  |  |  |  |
|   | RECEIV   | ED                               | 1/2921 11/                    |  |  |  |  |
| 4) Balance if SURPLU                          | <b></b> −  | ` "/                             | \$+ 45,936.04                 |  |  |  |  |
| 5) Balance if <b>DEFICIT</b>                  | NOV 9 20   | J                                | \$                            |  |  |  |  |
| 0   | NEW HAMPS  | SHIRE<br>OF STATE                | 2                             |  |  |  |  |
| - Tawara                                      | Ned Xordon_  | deroch                           | y W Hordon                    |  |  |  |  |
| Signature of Ca                               | andidate   | Signature of J                   | uscai Agent                   |  |  |  |  |

RSA 664:5, 7. Any candidate who has any outstanding debt, obligation, or surplus following the election shall file reports at least once every 6 months thereafter until the obligation or indebtedness is entirely satisfied or surplus deleted, at which time a final report shall be filed.

| ageofPages   |                            | Candidate or Committee Name: |                           | LDWARD NED CORDON                     |                                  |  |   |
|--|----------------------------|------------------------------|---------------------------|---------------------------------------|----------------------------------|--|---|
| EMIZED RECEIPTS  |                            |                              |                           | Reportin                              | g period ending                  | NOV. Z   | 2005  |
| l Name of Contributor<br>phabetical Order)   | Post Office Address        |                              | Amount of<br>Contribution | Date<br>Received                      | Aggregate* Contributions to Date | If contribution of is over \$100 list Occupation | or aggregate contribution t: and Place of Bus |
| phacedear Order)   |                            |                              |                           |                                       |                                  | Occupation                                       | THE THOUGHT DES                               |
| INTEREST   | +NCOME                     |                              | 346,5                     | 55                                    |                                  |  |   |
|  |                            |                              |                           |                                       |                                  |  |   |
|  |                            |                              |                           |                                       |                                  |  |   |
|  |                            |                              |                           |                                       |                                  |  |   |
|  |                            |                              |                           |                                       |                                  |  |   |
|  |                            |                              |                           |                                       |                                  |  |   |
| A CONTRACTOR OF THE CONTRACTOR |                            | AAAM NAME                    |                           |                                       |                                  |  | ,,,   |
| A  |                            |                              |                           |                                       |                                  |  | ·   |
|  |                            |                              |                           |                                       |                                  |  |   |
| tal of receipts unitemized (\$25   | or under) in this report   | <u> </u>                     |                           | · · · · · · · · · · · · · · · · · · · |                                  |  |   |
| EMIZED EXPENDITURES  |                            |                              | -                         | *** <i>I</i>                          | ndicato to which al              | ection expenditure applies                       | ,   |
|  |                            |                              | ount Da                   | ite                                   |                                  |  | •   |
| aid to Whom  | Post Office Address        | of E                         | expense of E              | xpense ***Primary                     | /General<br>O                    | Nature of Expenditure                            |   |
|  |                            |                              |                           |                                       |                                  |  |   |
|  |                            |                              |                           | O                                     | 0                                |  |   |
|  |                            |                              | · ,                       | О                                     | 0                                |  |   |
|  |                            |                              |                           | O                                     | 0                                |  |   |
|  |                            |                              |                           | О                                     | O                                |  |   |
|  |                            |                              |                           | 0                                     | 0                                |  |   |
|  |                            |                              |                           | 0                                     | 0                                |  |   |
|  |                            |                              |                           |                                       |                                  |  |   |
|  |                            |                              |                           | О                                     | O                                |  |   |
| ist occupation and place of bu   | siness if total exceeds \$ | 100 for primary or           | general election.         | RSA 664:6, I.                         |                                  |  |   |
|  |                            |                              |                           |                                       |                                  |  |   |
|  |                            |                              |                           |                                       |                                  |  |   |

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SECRETARY OF STATE

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